



SAN DIEGO POLICE DEPARTMENT - PERMITS AND LICENSING
1400 'E' STREET, MS-735, SAN DIEGO, CA 92101
Telephone No.: (619) 531-2250



ENTERTAINMENT - AFTER HOURS (ON-GOING)
VENUE OPEN 2:00 AM – 6:00 AM

San Diego Municipal Code, section 33.0101(c) states you must have a valid police permit to operate a business designated as police regulated. **Applications must be submitted to the Police Permits and Licensing Unit.** You are responsible for being familiar with and complying with the rules and regulations related to After Hours establishments. Copies of the After Hours Ordinance and General Divisions for police regulated activities may be obtained from the City Clerk's office located at 202 'C' Street, 2nd Floor, Phone (619) 533-4000 or via the City's website: [www.sannet.gov/SDMC Chapter 3, Article 3, Division 8 and Divisions 1-5](http://www.sannet.gov/SDMC%20Chapter%203,%20Article%203,%20Division%208%20and%20Divisions%201-5).

In order to legally operate your business and to establish that your business location is suitable, it is suggested that you first obtain the following:

- A copy of your **BUSINESS TAX CERTIFICATE** from San Diego City Treasurer's Office, 1200 Third Avenue (1st Floor), San Diego, CA 92101 - Phone (619) 615-1500 or website: www.sannet.gov/treasurer.
- A copy of your **CONDITIONAL USE PERMIT**, if applicable.
- A copy of your **ALCOHOLIC BEVERAGE CONTROL** license (with conditions) from the State of California Department of Alcoholic Beverage Control, 1350 Front Street (Room 5056), San Diego, CA 92101, Phone (619) 525-4064 (This license is needed if your event will serve alcohol).
- **FIRE MARSHAL APPROVAL** Should be shown on the bottom of the police application. Can be obtained from San Diego Fire and Life Services, 1010 Second Avenue (3rd Floor), San Diego, CA 92101, Phone (619) 533-4400 or city website: www.sannet.gov/fireandems/inspections/index.shtml.
- **ZONING APPROVAL** Should be shown on the bottom of the police application. Can be obtained from the City of San Diego Development Services, 1222 First Avenue (3rd Floor), San Diego, CA 92101 - Phone (619) 446-5000 or website: www.sannet.gov/development-services/industry/zoninginfo.shtml.
- A completed **POLICE PERMIT APPLICATION** for each owner, partner or corporate officer and an **ENTERTAINMENT PERMIT BUSINESS ADDENDUM**.
- A copy of the **ARTICLES OF INCORPORATION** from the State of California must be submitted, if a corporation is applying.
- **INVESTIGATION FEE** - (Cash, cashier's check or money order) for a **non-refundable** Investigation Fee of **\$104.00 per applicant**. (Please make payable to **CITY TREASURER**.)
- **REGULATORY FEE** - (Cash, cashier's check or money order) for the Regulatory Fee for **On-Going Venue** of **\$1,927.00** annually payable to **CITY TREASURER**.
- **MINIMUM DISTANCE REQUIREMENT** - There is a minimum distance requirement that the establishment must be 300 feet from any single-family or multi-family residence. The Chief of Police may grant a waiver of the minimum distance requirement. To request a waiver the applicant must provide written evidence that either:
 1. The households within 300 feet of the premise are aware of the application for the After Hours Permit and have no objection to the grant of the permit; or,
 2. Reasonable attempts were made to notify them and there was no response by the households.
- No **OUT OF STATE** checks will be accepted.
- A criminal records check will be made on each applicant.
- A 30-day investigation period begins at the time each completed application is submitted.



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Telephone No.: (619) 531-2250



APPLICATION

TYPE OF PERMIT: _____

☐ Owner ☐ Employee ☐ Partner ☐ Corporate Officer ☐ LLC

Date of Birth: _____ Driver's License/ID #: _____ State: _____

Applicant's Full Name: _____

Other Names Used: (Maiden, Alias, Etc.) _____ Last First Middle Stage Name: _____

Residence Address: _____ City, State, Zip: _____

Mailing Address: _____ City, State, Zip: _____

Res. Ph. () _____ Bus. Ph. () _____ Cell Ph. () _____ Fax () _____

Internet Web Site Address/Auction Site User Name: _____

Soc. Sec. #: _____ Place of Birth: _____

Eyes: _____ Hair: _____ Height: _____ Weight: _____ Race: _____ Sex: _____

Business Where Applicant Expects to be Employed:

Business Name: _____ D.B.A.: _____

Business Address: _____ City, State, Zip: _____

1. List previous residence addresses for the last five (5) years:

	Complete Addresses last five years	Year Date From	Year Date To
1			
2			
3			
4			
5			

FOR OFFICE USE ONLY

App. Date: _____ Permit Number: _____ Received by: _____ ☐ Live Scan Rec: _____

Records Check: _____ ☐ RI01 ok or _____
Initials/ID #

Approving PCCO: _____ Date: _____

2. List previous occupations, places of employment and/or schooling for the last five (5) years.

1	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
2	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
3	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
4	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO
5	PLACE OF EMPLOYMENT	OCCUPATION	
	ADDRESS & PHONE	DATE FROM	DATE TO

3. List similar permits or licenses issued by any agency or board, or any city, county, state or federal agency in the past five (5) years. **IF NONE, INITIAL HERE:** _____

	TYPE OF LICENSE	LICENSE NUMBER	DATES HELD	CITY AND STATE
1.				
2.				
3.				

4. Have you ever had any permit or license issued by any agency or board, or any city, county, state or federal agency suspended or revoked? Yes () No ()

If yes, please complete below:

	CITY/STATE	DATE OF SUSPENSION OR REVOCATION	REASON
1.			
2.			
3.			

5. List all criminal convictions, except traffic convictions. Include pleadings of guilty to a lesser charge in satisfaction of, or as a substitute for, an original charge, and pleadings of *nolo contendere*. Expunged convictions must be listed per California Penal Code section 1203.4(a).

IF NONE, INITIAL HERE: _____

	CHARGE	DATE CONVICTED	LOCATION OF COURT
1			
2			
3			
4			
5			
6			

APPLICANTS: The right of reasonable inspection shall be a condition for issuance of a police permit. If a permit is issued, representatives of the police department shall have access to the business premises during normal business hours, which may include entry into the non-public portion of the business.

It is the responsibility of the permit holder to renew the permit no later than ten (10) calendar days after the expiration date on the permit. Failure to renew on time will result in penalty fee of \$25.00 plus 10% of the regulatory fee. If a renewal is not completed with all fees and penalties paid within thirty (30) days after the permit expiration date, the permit expires and business operations, occupations, or activities allowed by the permit must cease. A permittee must then begin the application process as a new applicant (Section 33.0308 of the San Diego Municipal Code).

I declare under penalty of perjury that the statements made on this application, including accompanying documents, are true, complete and correct to the best of my knowledge and belief. I understand that any false statements or information are grounds for denial of this application or loss of licensure and that I may be subject to prosecution per section 11.0401(b) of the San Diego Municipal Code.

I AM AWARE THAT THE INVESTIGATION FEE IS NON-REFUNDABLE. I AM AWARE THAT I AM RESPONSIBLE FOR BEING FAMILIAR WITH AND COMPLYING WITH THE RULES AND REGULATIONS RELATED TO THE POLICE REGULATED BUSINESS OR OCCUPATION FOR WHICH I AM APPLYING. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT RELIEVE ME FROM OBTAINING PERMITS OR APPROVALS REQUIRED BY THE CITY OF SAN DIEGO OR STATE OR FEDERAL LAW. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT RELIEVE ME FROM COMPLYING WITH ALL APPLICABLE LOCAL, STATE, AND FEDERAL LAWS, INCLUDING THOSE RELATED TO BUILDING, ZONING, AND FIRE, AND OTHER PUBLIC SAFETY REGULATIONS. I AM AWARE THAT THE GRANTING OF A POLICE PERMIT DOES NOT VEST ANY DEVELOPMENT RIGHTS IN THE PROPERTY OR BUSINESS.

APPLICANT'S SIGNATURE

DATE OF APPLICATION

PLEASE BE ADVISED THE INFORMATION YOU PROVIDE ON YOUR APPLICATION MAY BE SUBJECT TO PUBLIC DISCLOSURE PER THE CALIFORNIA PUBLIC RECORDS ACT.

ENTERTAINMENT PERMIT/BUSINESS ADDENDUM

PLEASE COMPLETE ALL SECTIONS

(TYPE OR PRINT LEGIBLY)

TYPE OF PERMIT: _____ ALCOHOL ☐ YES ☐ NO HOURS OF OPERATION _____

☐ Sole Owner ☐ Partnership ☐ Corporation ☐ LLC

☐ LIVE ENTERTAINMENT:
CIRCLE WHAT APPLIES)

DANCING KAROKE LIVE BAND D.J. OTHER _____

AGE GROUP EXPECTED ATTENDANCE _____

18 and UP ☐ 0 - 49 persons ☐

21 and UP ☐ 50 or more persons ☐

Business Name: _____ D.B.A. _____

Business Address: _____ City & Zip: _____

Mailing Address: _____ City & Zip: _____

Location of Event: _____

Date of Event: _____ Time of Event: _____

Business Tax Certificate # _____ Name of Licensed Security Company: _____

LIST ALL FICTITIOUS NAMES THE BUSINESS WILL OPERATE OR ADVERTISE UNDER:

	FICTITIOUS NAME	PHONE #
1		
2		

IF APPLICANT IS A CORPORATION:

NAME OF CORPORATION AS SHOWN IN ARTICLES OF INCORPORATION OR CHARTER	DATE OF INCORPORATION	STATE OF INCORPORATION

NAMES AND RESIDENCE ADDRESSES OF EACH CURRENT CORPORATE OFFICER AND DIRECTOR:

NAME	RESIDENCE ADDRESS	TITLE
		PRESIDENT
		VICE PRESIDENT
		SECRETARY
		TREASURER

FOR OFFICE USE ONLY

DATE FILED: RECEIVED BY: DEVELOPMENT SERVICES - ZONING	DATE FILED: RECEIVED BY: FIRE & LIFE SAFETY DEPARTMENT
APPROVED BY: DATE: PHONE:	APPROVED BY: DATE: PHONE:
APPROVING OFFICER: _____ DATE: _____	

IF PARTNERSHIP, LIST NAME AND RESIDENCE ADDRESS OF EACH PARTNER, INCLUDING LIMITED PARTNERS:

NAME	RESIDENCE ADDRESS	TITLE

LIST FULL TRUE NAME AND ANY OTHER NAMES USED BY THE OWNERS AND ANY PERSONS WHO EXERCISE CONTROL OVER THE OPERATION, MANAGEMENT, DIRECTION OR POLICY OF THE BUSINESS, OR WHO ARE RESPONSIBLE FOR THE DAILY OPERATION OF THE BUSINESS:

	FULL NAME	TITLE
1		
2		
3		
4		
5		

APPLICANT'S PREMISES ARE ☐ OWNED ☐ LEASED/RENTED

IF RENTED OR LEASED, PLEASE PROVIDE THE NAME AND ADDRESS OF THE PROPERTY OWNER(S):

PROPERTY OWNER'S NAME	PROPERTY OWNER'S ADDRESS

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I declare under penalty of perjury that the statements made on this application, including accompanying documents, are true, complete and correct to the best of my knowledge and belief. I understand that any false statements are grounds for denial of this application or loss of licensure and that I may be subject to prosecution per section 11.0401(b) of the San Diego Municipal Code.

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APPLICANT'S SIGNATURE _____

DATE OF APPLICATION _____

RESPONSIBLE PERSON COMPLETING APPLICATION IF NOT APPLICANT - PRINT & SIGN

TITLE/POSITION _____

OVERALL EVENT DESCRIPTION AND SITE DIAGRAM

PLEASE PROVIDE A DETAILED DESCRIPTION OF YOUR EVENT AND ATTACH A SITE DIAGRAM.

[illegible]

THIS DOCUMENT IS AN EXAMPLE FOR YOUR SPECIFICATIONS.

FOR LEGAL REQUIREMENTS CONTACT YOUR ATTORNEY OR

LEGAL ADVISOR REFERENCE: MUNICIPAL CODE 33.0806.

Date _____

Occupant _____

Re: After-Hours Application

Dear Resident,

I am writing this letter on behalf of the owner of _____ . If you are
unaware of the _____ , it is an upscale _____ located in the basement at
_____. The purpose of this letter is to notify you that
_____ intends to apply for an "after-hours" permit for its
establishment.

Under the newly approved guidelines for this type of license it is required by the applicant to
notify all residents within 300 feet of the establishment of its intent to get an "after-hours"
permit. The "after-hours" permit would allow the applicant the right to operate its
establishment from 2 a.m. until 4 a.m. Should you be against the issuance of this license it is
respectfully requested that you notify me and send a courtesy copy to the San Diego Police
Department c/o Permits and Licenses at 1401 Broadway, within 10 (ten) days of receipt of this
letter.

I think it is important to note that this permit does NOT allow for the continued service of
alcoholic beverages after the State of California Law of 2 a.m. This license is intended to give
operators the "option" to offer entertainment and dancing until the later hours. To speak more
specifically it is our intent to only utilize this license for special occasions.

Should you have questions, concerns, or wish to discuss this matter with myself please feel free
to contact me at _____. Thank you in advance for your consideration in
this matter.

Sincerely,

PROOF OF SERVICE BY MAIL OR PERSONAL DELIVERY

I am employed at the _____ that serves as corporate
headquarters for several small businesses including both _____ dba

I am over the age of 18 and not a party to the above noted action. My business address is

On this date, I served the following documents described as:

NOTIFICATION LETTER REGARDING AFTER HOURS PERMIT FOR

NOTIFICATION LETTER REGARDING AFTER HOURS PERMIT FOR

On all known/unknown residents at the addresses on the list attached
as Exhibit One by: _____ placing _____ the original _____ a
true copy thereof enclosed in a sealed envelope addressed as stated below

All recipient addresses listed on attached Exhibit One

SAMPLE
BY MAIL: I am readily familiar with the office's practice of collection and
processing correspondence for mailing. Under that practice, it would be deposited with the U.S. Postal
Service on the same day with postage thereon fully prepaid, mailed at San Diego, California, in the
ordinary course of business. I am aware that on motion of the party served, service is presumed invalid
if postal cancellation date or postage meter date is more than one day after date of deposit for mailing
in affidavit.

BY PERSONAL SERVICE: I caused such envelope to be delivered by hand to the
offices of the addressee.

BY FACSIMILE TRANSMISSION: From FAX NO. () to
the facsimile numbers listed on the above noted mailing list. The facsimile machine I used complied with
Rule 6 (e), and no error was reported by the machine.

STATE: I declare under penalty of perjury, under the laws of the State of California,

1 that the foregoing is true and correct.

2
3 Executed on _____ at San Diego, California

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SAMPLE

THIS DOCUMENT IS AN EXAMPLE FOR YOUR SPECIFICATIONS.
FOR LEGAL REQUIREMENTS CONTACT YOUR ATTORNEY OR
LEGAL ADVISOR REFERENCE: MUNICIPAL CODE 33.0806.

Date _____

SDPD Permits and Licensing
1401 Broadway, M. S. 735
San Diego, California 92101

REG: After-Hours Permit for _____

Dear _____

Enclosed please find the After-Hours Permit Application for _____.
In addition, please find full payment for the application review/annual permit fee. In
order to resolve the new requirements regarding notification of any residents within
300 feet zone, I have also enclosed a proof of service and copy of each letter sent out to
all residents known to us at this time. Please do not hesitate to contact me at your
convenience if you would like to discuss this, or are in need of further information. I can
be reached at _____ or _____. As always, thank you for your
assistance in this matter and I look forward to hearing from you soon.

Very Truly Yours,